Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN DE SMALL ENTITY		
TOTAL CLAIMS			26			1		RATE	FEE	7	RATE	FEE	
FOR .			NUMBER FILED		NUMBER EXTRA		1	BASIC FE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			20 minus 20=		*			XS 9=		OR	X\$18=		
INI	DEPENDENT C	CLAIMS	, m	ınus 3 =	*			X43=	<del>                                     </del>	1	X86=		
М	JLTIPLE DEPE	NDENT CLAIM P	RESENT					<del>                                    </del>	<del>-</del> .	OR	700-		
<u> </u>	f the difference	e in column 1 is	less than 7	aro entor	"O" in c	solumo 2	J	+145=	ļ	OR	-290=		
* If the difference in column 1 is less than zero, enter "0" in column 2  CLAIMS AS AMENDED - PART II						JOIGITHI Z		TOTAL		OR	TOTAL	שר	
		(Column 1)	MENDEL	Colum) - <b>(</b>		(Column 3)		SMALL	ENTITY	OR	OTHER SMALL		
AMENDMENT A	CLAIMS			HIGHEST			1		ADDI-	<b>,</b>		ADDI-	
		REMAINING AFTER AMENDMENT		PREVIO	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	**		=		XS 9=		OR	X\$18=		
ME	Independent	*	Minus	***		=		X43=		OR	X86≈	•	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	1.45		1 1	200		
							Į	+145=		OR	+290=		
							,	TOTAL ADDIT. FEE		OR ,	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
8		CLAIMS REMAINING		HIGHE NUMB		PRESENT			ADDI-	] [		ADDI-	
N		AFTER		PREVIO		EXTRA	1 1	RATE	TIONAL		RATE	TIONAL	
<b>AMENDMENT</b>	Total	AMENDMENT	<b>.</b>	PAID F	OH		<b> </b>		FEE		· -	FEE	
	Total Incependent	*	Minus Minus	**		=		X\$ 9=		OR	X\$18=		
AM	FIRST PRESENTATION OF MULTIPLE D		L	PENDENT CLAIM		] <del>-</del>		X43=		OR	X86=		
	1		CTIT CE DEF	LINDEIN	CEXIIVI			+145=	•	OR	+290=		
•	1				•	·		TOTAL DDIT FEE		OR ,	TOTAL ADDIT. FEE	`	
		(Colum	n 21	(Column 3)		DDII. FEE I		,	KUUII. FEE <b>L</b>	- "-			
AMENDMENT C	`	(Column 1) CLAIMS		HIGHE	ST	(50.0.,	г	<del></del>	ADDI-	Г	1	ADDI	
		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE	TIONAL	l	RATE	ADDI- TIONAL	
	Total		Minus	**	011	=		X\$ 9=	FEE		X\$18=	FEE .	
	Independent	*	Minus	***		=	<b> </b>			OR			
۷	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						L	X43=		OR	X86=		
								+145=	·	OR	+290=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													
	ine highest Num	per Previously Paid	ror" (Total or	Independen	it) is the l	highest number	foun	o in the app	ropriate box	in colu	mn 1.		